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**REQUEST FOR WITHDRAWAL
AS ATTORNEY OR AGENT**

Applicati n Number	09/017,735
Filing Dat	February 3, 1998
First Named Inventor	Howard GREY
Group Art Unit	1644
Examiner Name	Ronald Schwadron
Attorney Docket Number	399632000820

To: Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313

I hereby apply to withdraw as attorney or agent for the above identified application.

This request to withdraw is being made at the request of the applicant.

1. ☐ The correspondence address is NOT affected by this withdrawal.
2. ☒ Change the correspondence address and direct all future correspondence to:

CORRESPONDENCE ADDRESS

☐ Customer Number →
Customer Number

OR

☒ Firm or Individual Name **Sterne, Kessler, Goldstein & Fox PLLC
Eric K. Steffe**

Address **1100 New York Avenue, N.W.**

City	Washington D.C.	State	D.C.	Zip	20005-3934
Country	US	Telephone	202.371.2600	Fax	202.371.2540

- ☒ This request is made on behalf of myself and
☐ all attorneys/agents of record,
☐ the attorneys/agents (with registration numbers) listed on the attached paper(s), or
☒ the attorneys/agents associated with Customer Number 25225

This request is enclosed in triplicate.

Name **Kate H. Murashige - Reg. No. 29,959**

Signature *Kate H. Murashige*

Date **July 23 2003**

**NOTE: Withdrawal is effective when approved rather than when received.
Unless there are at least 30 days between approval of withdrawal and the expiration date of a time
period for response or possible extension period, the request to withdraw is normally disapproved.**

I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450, on the date shown below.

Dated: 7/27 Signature: *Matt Russell* (Matt Russell)